

Name: _____
 Mailing Address: _____
 City, State, Zip Code: _____
 Daytime Phone Number: _____
 Evening Phone Number: _____
 Representing: ☐ Self ☐ Petitioner ☐ Respondent
 State Bar Number: _____

SUPERIOR COURT OF ARIZONA IN MARICOPA COUNTY

 Petitioner/Plaintiff

Case No. _____

ATLAS No. _____

 Respondent/Defendant

PROPOSED PATERNITY RESOLUTION STATEMENT OF:

☐ FATHER
☐ MOTHER

The undersigned party provides the following specific positions on each of the issues in this case (BE SPECIFIC):

1. IV-D Case:
☐ I receive or have received public assistance that may include AFDC, TANF, or AHCCCS for my children or me.
☐ I have a case with the Division of Child Support Enforcement.

2. Custody: The other parent and I have the following natural or adopted children in common:

Child(ren)'s Name(s)	Date of Birth	Age
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

I want the child[ren] to live primarily with ☐ Mother OR ☐ Father and have parenting time with ☐ Mother ☐ Father as follows (check all that apply):

- ☐ In accordance with _____ County Guidelines for reasonable parenting time.
☐ Every other weekend from:
 _____ at _____ a.m./p.m. to _____
 _____ at _____ a.m./p.m.

- ☐ One-half of the holidays on an alternating basis.
☐ For _____ weeks in the summer from _____ to _____ (inclusive).
☐ Spring Break from school.

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- ☐ Other: _____
- ☐ Mother ☐ Father ☐ Both parents should make the decisions about the child(ren), such as schools, doctors, etc. This should be a ☐ sole custody ☐ joint custody arrangement.

3. Child Support: My position on the financial factors necessary to calculate child support under the statewide child support guidelines is as follows (complete in full):

Father's Gross Monthly Income: \$ _____

Mother's Gross Monthly Income: \$ _____

- ☐ Father has _____ other child(ren) not listed above who live(s) in his household.
- ☐ Father has _____ other child(ren) not listed above for whom he pays court-ordered child support in the amount of \$ _____ per month.
- ☐ Mother has _____ other child(ren) not listed above who live(s) in her household.
- ☐ Mother has _____ other child(ren) not listed above for whom she pays court-ordered child support in the amount of \$ _____ per month.
- ☐ Medical Insurance should be paid by [☐] Mother [☐] Father. The monthly cost for the child(ren) is \$ _____.
- ☐ Monthly Child Care Costs for _____ child[ren] is \$ _____.
- ☐ Extra Education Expenses or Extraordinary Child Adjustments: I believe the court should add the following to the child support calculation (leave blank if none claimed):

Description	Monthly Amount
_____	_____
_____	_____
_____	_____

- ☐ Uninsured Medical Expenses should be paid:
- ☐ Pro rata based upon each party's income as provided in the guidelines; or
- ☐ Other: _____% paid by Father and _____% paid by Mother.
- ☐ Tax Exemptions for the child[ren] should be divided (check one):
- ☐ Pro rata based upon each party's income as provided in the guidelines; or
- ☐ Other: _____
4. ☐ Past Support should be paid by [☐] Mother [☐] Father for the period of _____ through _____ in the amount of \$ _____.
5. ☐ Direct payments for support have been [☐] received by me [☐] paid by me for the period of _____ through _____ in the amount of \$ _____.
6. ☐ Past Medical Expenses have been incurred by me (and not reimbursed by insurance) for the period of _____ through _____ in the amount of \$ _____ and the other parent should be ordered to reimburse me for _____% of those expenses.
7. ☐ Expenses for pregnancy, childbirth, and genetic testing have been incurred by me (and not reimbursed by insurance) in the amount of \$ _____ and the other parent should be ordered to reimburse me for _____% of those expenses.

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8. Attorneys' Fees: If the case is settled today, I want the court to order (choose one):
- ☐ Each party to pay his or her own attorneys' fees and costs.
- ☐ Mother to pay \$ _____ of my attorneys' fees and costs within _____ days.
- ☐ Father to pay \$ _____ to other party for attorneys' fees and costs within _____ days.

9. Name Change: I want the child(ren)'s names to be changed as follows:

10. Other Issues: Briefly state the other issues that you believe must be resolved to fully settle this case:

11. Settlement: I verify that the above statements are true upon my best information and belief and I am willing to settle and resolve this case based upon the information provided above. I will be prepared to show documentation to support my position at the time of the conference or hearing.

Date

Signature of ☐ Mother ☐ Father